

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	108	20511	916
O.I.P.E. CLASSIFIER			5/25/87
FORMALITY REVIEW	JK	835	10/11/87
RESPONSE FORMALITY REVIEW	7/11/87	6747	12/1/87

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 0 ..... Objected

Claim	Date
Final 6	6/10/87
Original 19	3/17/87
Original 20	3/20/87
1	V V V V V
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3	V V D
4	V V V V
5	V V V V
6	V V V V
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8	V V V V
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11	V V V V
12	V V V V
13	V V V V
14	V V V V
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16	0 V V V V
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18	V V V V
19	V V V V
20	V V V V
21	V 0 0 0 V
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Claim	Date
Final 51	
Original 52	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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